

UNITED STATES PATENT APPLICATION TRANSMITTAL FORM

22264 U.S. PTO

10/664492



Mail Stop Patent Application
COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, V.A. 22313-1450

Docket No.: 0001438/3062USU

Sir:

Transmitted herewith for filing is the patent application of

Inventor(s): **JONG-KOOK LIM and KEON-SOO CHOI**

For: **CYCLONE DUST-COLLECTING APPARATUS
OF VACUUM CLEANER**

Enclosed are:

XXX Specification (18 pps.) consisting of: Description (12 pps); Claims (5 pps);
Abstract (1 pp);

XXX 4 sheets of drawings;

XXX Declaration and Power of Attorney;

XXX An assignment of the invention to: **SAMSUNG GWANGJU ELECTRONICS
CO., LTD.**, including \$40.00 recordation fee and Assignment Recordation
Form Cover Sheet;

 Information Disclosure Statement (with copies of patent);

 Form - PTO-1449;

 The undersigned attorney has verified that the applicant is entitled to a
Small Entity Status; and

 Priority of U.S. Provisional Patent Application Serial No. _____, filed
on _____ is claimed under 35 U.S.C. §119(e).

 Priority of U.S. Patent Application Serial No. _____, filed on _____
_____ is claimed under 35 U.S.C. §120.

XXX Priority of application Serial No. **10-2003-0035210** filed on **June 2, 2003**
in **Korea** claimed under 35 U.S.C. §119;

XXX Korean Priority Document Application No. **10-2003-0035210** filed on
Jun 2, 2003.

 A Request and Certification Under 35 U.S.C. 122(b)(2)(B)(i).

The Filing Fee is calculated below.

CLAIMS AS FILED				
(1) For	(2) Number Filed	(3) Number Extra	(4) Rate	(5) Basic Fee \$750.00
Total Claims	21 - 20 =	1	x \$18.00	\$18.00
Independent Claims	2 - 3 =	0	x \$84.00	\$0
Multiple Dependent Claim Fee		x \$280.00 = \$0.00		
TOTAL FILING FEE		\$768.00		
1/2 FILING FEE FOR SMALL ENTITY				\$N/A

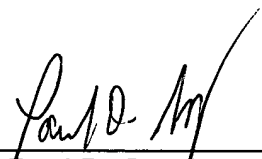
_____ No fee enclosed – filing by missing parts.

XXX A check in the amount of **\$808.00** (\$768 filing fee and \$40 assignment recordal fee) is enclosed.

XXX The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. §§1.16 and 1.17 which may be required with this communication or during the entire pendency of the application, or credit any overpayment, to **Deposit Account No. 01-0467**. A duplicate copy of this Form is enclosed.

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Leslie Moscatello
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